

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470

email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

M49 FCRPY

'07 JAN -5 A10:42

STATE OF HAWAII STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST							
NAME(Last)	(First)	(Middle)	TELEPHONE				
MORRIS	GEORGE "RED"	Α.	808/531-4551				
MAILING ADDRESS (Street)			FAX				
222 SOUTH VINEYARD STREET	808/533-4601						
(City)	(State)	(Zip	(Zip Code)				
HONOLULU	HAWAII	96813-	96813-2453				
EMPLOYING ORGANIZATION (Fill	TELEPHONE						
CAPITOL CONSULTANTS OF HA	808/531-4551						
MAILING ADDRESS (Street)	FAX						
222 SOUTH VINEYARD STREET	808/533-4601						
(City)	(State)	(Zip	(Zip Code)				
HONOLULU	HAWAII	96813	96813-2453				

PART II ORGANIZATIO	N				
NAME OF ORGANIZATION YOU	TELEPHONE 531-7408				
HAWAII SUPERFERRY					
MAILING ADDRESS (Street)	FAX 531-7410				
ONE WATERFRONT PLAZA, SUITE 300, 500 ALA MOANA BOULEVARD					
(City)	(State)	(Zip Code)			
HONOLULU	н	96813			
NAME OF PERSON RESPONSIBLE	TELEPHONE 808-531-4551				
MELODY BUTAY DACANAY					
MAILING ADDRESS (Street)	FAX 808-533-4601				
222 SOUTH VINEYARD STREET	Γ, SUITE 401				

	v g		-			
	(City)	(State)	e) (Zip Code)		de)	
HON	IOLULU	HI	96813-2453		J-2453	
PAR	T III DESCRIPTION	OF SUBJECTS UPON WHICH	H YO	J EXPECT TO LOBBY		
[]	Agriculture	[ ] Education	[ ]	Human Services	[ ] Science, Technology &	
[ ]	Communications & Public Utilities	[X] Government Operations & Finance	[X]	Intergovernmental Relations, International Affairs	Economic Development  [X] Tourism & Recreation	
[X]	Consumer Protection & Commerce	[ ] Hawaiian Affairs	[ ]	Labor & Employment	[X] Transportation	
[]	Culture, Arts, Historic Preservation	[ ] Health	[X ]	Planning, Land & Water Use Management	[ ] Other: (indicate below)	
[ ]	Ecology, Energy Environmental Protection	[] Housing	[ ]	Public Safety & Corrections		
PAR		N OF LOBBYIST				
	I hereby certify that the	e information furnished above i	is, to t	he best of my knowledge	e, correct and complete.	
<del>(</del>					1/4/07	
`		(Signature of Lobbyist)	(Signature of Lobbyist)		(Date)	
	TO ALITHODIZATIO					
PAR NAME	***************************************	IN TO LOBBY		LE OF ALITHODIZINO OFFIC	ED OD DEDOGNIED	
IAMINI	<u> </u>		1111	LE OF AUTHORIZING OFFICE	ER OR PERSON REPRESENTED	
	N GARIBALDI			PRESIDENT & CEO		
NAM	NAME OF ORGANIZATION (if applicable)				ELEPHONE 531-7408	
HAW.	All SUPERFERRY					
MAIL	MAILING ADDRESS (Street)			F	AX 531-7410	
ONE	WATERFRONT PLAZA, SUI	ITE 300, 500 ALA MOANA BOULEVA	4RD			
	(City)	(State) (2		(Zip Cod	ip Code)	
	HONOLULU	ONOLULU HI		96813		
	I hereby authorize the a	above - named person to enga	ige in	lobbying activities on bel	half of the undersigned.	

(Signature of Authorizing Officer or Person Represented)

(Date)